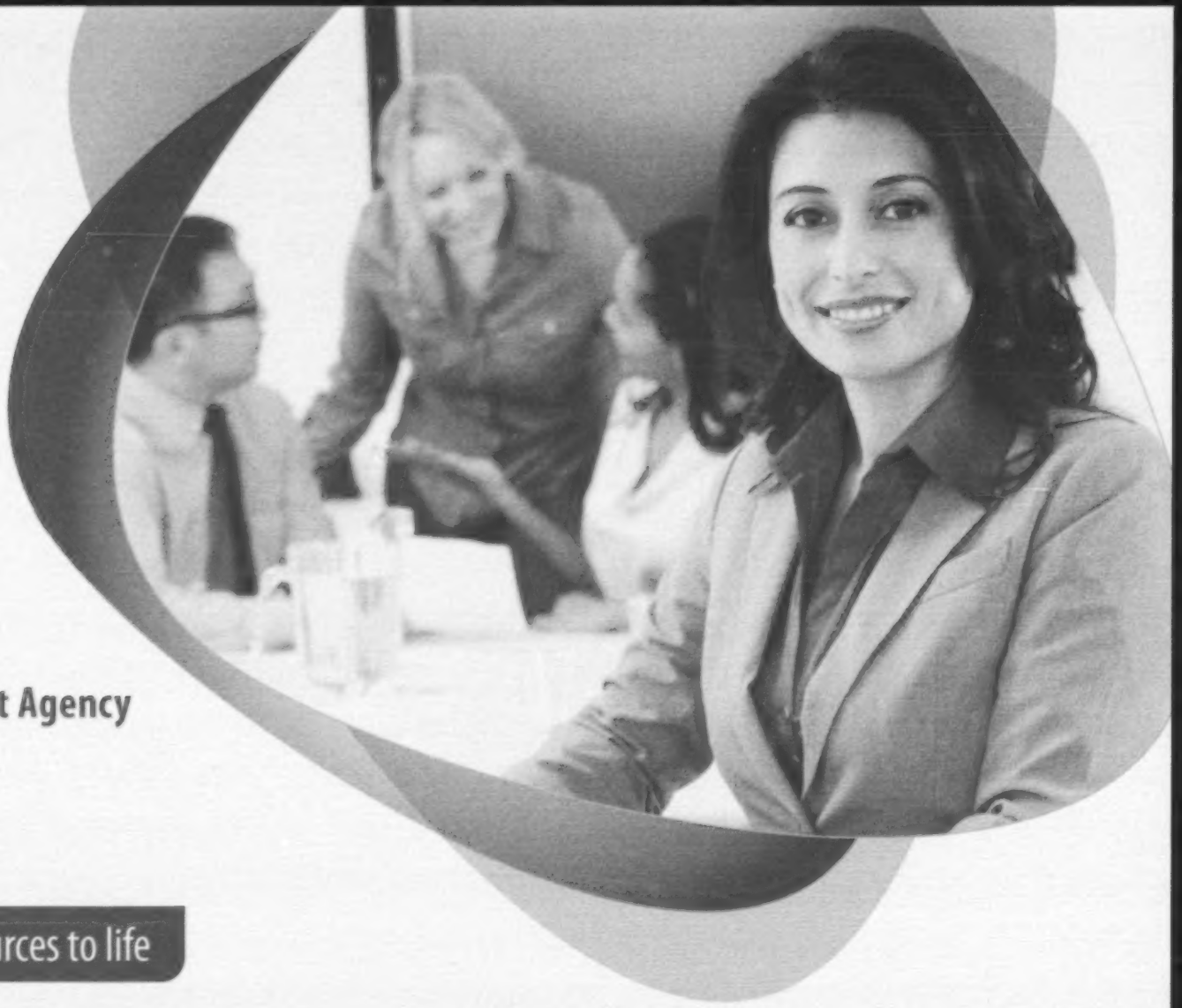
HealthForceOntario



HealthForceOntario Marketing and Recruitment Agency

Annual Report 2013-14

Bringing health human resources to life

Ontario

HealthForceOntario Marketing and Recruitment Agency

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INSPIRE

DEVELOP

DRIVE

Letter from Chair and Executive Director

We have had an exceptional year. It has included: a value for money audit, the development of a strategic plan and program migration process, and an organizational redesign. We've also done tremendous work around health human resources recruitment and retention in Ontario. In this year's Annual Report, we focus on three words that best describe our contribution: **inspire**, **develop** and **drive**.

In our 2012-13 report, we shared the Office of the Auditor General of Ontario (OAGO) would be conducting a value for money audit of HealthForceOntario, including the Ministry of Health and Long-Term Care as well as the agency. The OAGO's December 2013 report was encouraging and we have started implementing the recommendations provided.

After extensive engagement of and consultation with agency staff and stakeholders, we produced our three-to-five year Strategic Plan at the end of 2013. The agency strategy is aligned with the refreshed government health human resources strategic direction. We are exceedingly proud of the finished product and are now focused on implementation.

The OAGO report and strategic plan development were not our only milestones. Together, the ministry and agency are looking towards leveraging the success of the agency to consider adding programs and services. Under consideration are approximately 25 programs with a staged approach that supports migration without compromising the agency's existing programs and services.

We embrace opportunities for improvement as is evident through: HFOJobs redesign, the introduction of a preparation course for the Objective Structured Clinical Exam (OSCE) for internationally educated nurses (IENs), and release of the *ED Toolkit* on our website. These are highlighted in the Annual Report.

Over the last few months, these and other initiatives inspired the agency to examine and redesign its current organizational structure, positioning HFO MRA to better support implementation of the agency's new Strategic Plan, respond to changes in the health human resources arena, support HealthForceOntario's health human resources strategic direction, and accept new programs.

Agency staff must be acknowledged for this year's successes. Their drive to provide quality service is the foundation on which the agency does its best work.

Many thanks to each of our board members, who share their vast experiences and key insights, informing our strategic and policy deliberations. Their experience and diversity provide a solid foundation for the upcoming growth of the agency.

We anticipate you will enjoy reading our progress to date. We look forward to continuing to *bring health human resources to life.*

Peter Wells, MD, CCFP, FCFP, FRRMS
Chair

Roz Smith, MHSc, CAE
Executive Director

Letter from Assistant Deputy Minister

HealthForceOntario

Ministry of Health and Long-Term Care

Health Human Resources Strategy Division

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Ontario

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Dr. Peter Wells
Chair, Board of Directors
HealthForceOntario Marketing and Recruitment Agency
163 Queen Street East, 2nd Floor
Toronto ON M5A 1S1

Dear Dr. Wells:

Re: HealthForceOntario Marketing and Recruitment Agency (HFO MRA) 2013/14 Annual Report

The HFO MRA Annual Report is a time for reflection on the accomplishments of the HFO MRA. As the operational arm of the HealthForceOntario health human resources strategy, the HFO MRA continues to demonstrate excellence in service delivery to health care providers and communities across Ontario. By providing key support services to health care providers and "on-the-ground" information for health human resource planners, your efforts are continuing to improve access to care for patients in need, each and every day.

In 2013/14 we were able to see demonstrable results of your efforts. To highlight a few, accomplishments include:

- Assisting in filling 536 physician job opportunities, 75% of which were in areas of high need
- Supporting staffing for hospitals and communities in order to avert emergency department service disruption
- Providing 19,506 hours of urgent care physician coverage
- Providing13 Northern communities with 7,845 days of specialist locum coverage
- Supporting 29 Physician Assistants in accepting positions through the Career Start Program

I have also reflected on your recent work to refresh your strategic plan; this effort is a significant achievement in strategically guiding the HFO MRA in the future, in adapting to the ever-evolving health human resource context.

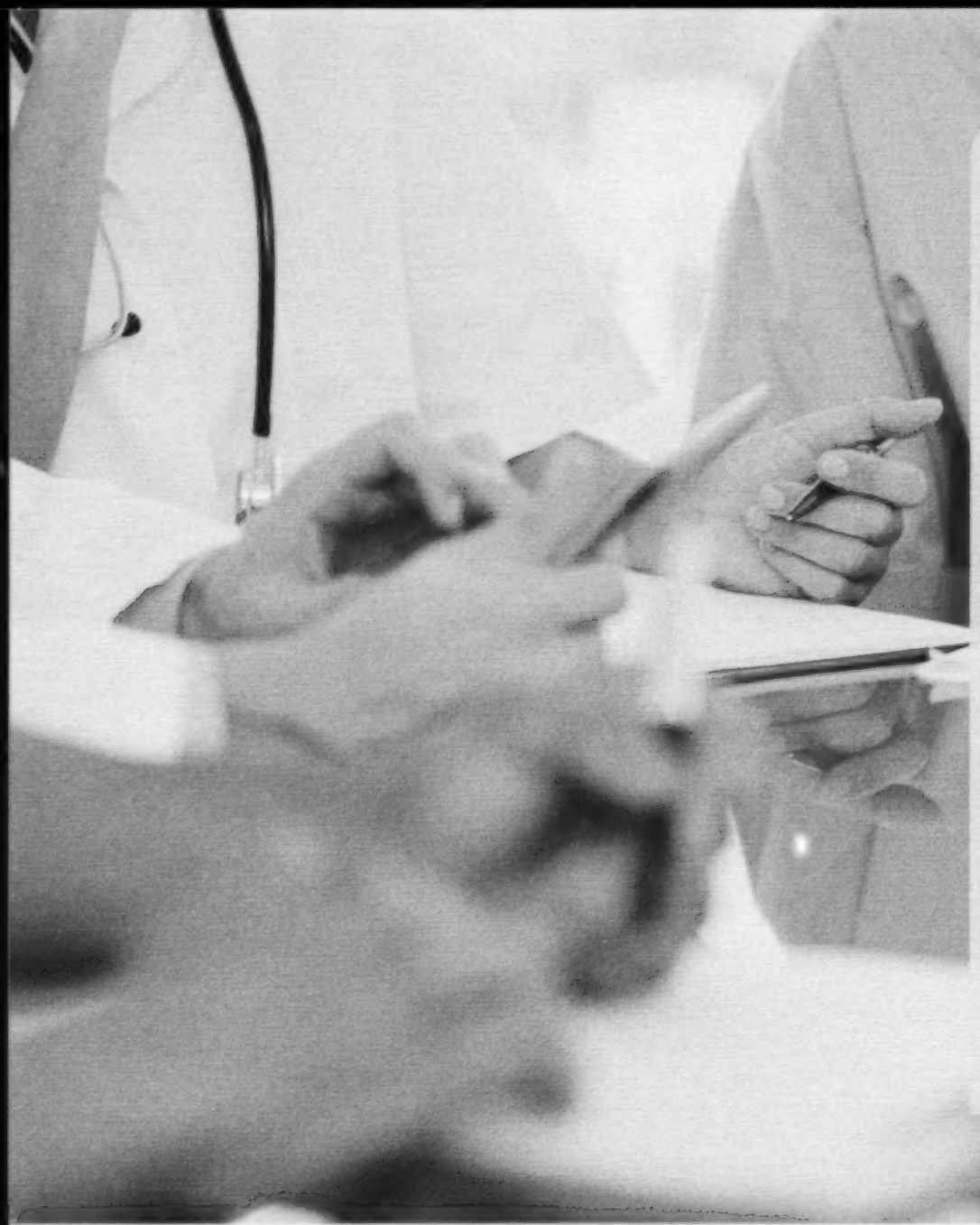
-2

On behalf of the Ministry of Health and Long-Term care, I would like to express my appreciation and congratulations to the Board, Executive Director and the entire team for your ongoing success and look forward to working with you in the upcoming year.

Sincerely,

Suzanne McGum
Assistant Deputy Minister
Health Human Resources Strategy Division

c: Rosalind Smith, Executive Director, HealthForceOntario Marketing and Recruitment Agency
John Amodeo, Director, Health System Labour Relations and Regulatory Policy Branch



Agency Snapshot

HealthForceOntario Marketing and Recruitment Agency (HFO MRA/the agency) arose out of the Government of Ontario's health human resources strategy. As an operational service agency, HFO MRA is focused on building and maintaining the province's health human resources capacity, leading to two categories of activity:

- Recruitment and outreach to:
  - *Internationally educated health professionals living in Ontario*
  - *Ontario's recruitment community*
  - *Practice-ready physicians living outside Ontario who are practising in high-need specialties.*
- Retention and distribution of Ontario's health professionals:
  - *Physicians via Practice Ontario, the locum programs*
  - *Physician assistants.*

During 2013-14, the agency developed a strategic plan, which will serve as its way forward for the next three to five years based on three strategic directions:

1. Delivering strategic health human resources solutions.
2. Building strategic partnerships.
3. Embracing ongoing process improvement.

Implementation of the new strategic plan will begin in 2014-15.

When examining the agency's programs and services, common keywords emerge that describe how HFO MRA helps clients and stakeholders: **inspire**, **develop** and **drive**. These keywords – or overarching themes –support the agency's strategic priorities and positively impact health human resources in Ontario.

Vision

Bringing health human resources to life.

Mission

We inspire, develop and drive health human resources solutions.

Values

HFO MRA has adopted Values intended to guide all agency programs and services:

CLIENT CENTREDNESS

HIGH-QUALITY OUTCOMES

BEST POSSIBLE RETURN ON PUBLIC INVESTMENT

Programs and Services

Clerkship Travel Program

The Clerkship Travel Program covers select travel and accommodation expenses for eligible medical students (clerks) in the final two years of their program who are accepted for a clinical rotation. The program helps improve the distribution of physicians across Ontario by giving undergraduate medical students exposure to alternative practice settings.

Community Showcases

Community Showcases connect interested physicians from targeted specialties with job opportunities in Ontario communities that have high physician vacancies. Communities are identified and opportunities are showcased to physicians through webinars, e-communications, and other means to encourage them to apply.

Emergency Department Coverage Demonstration Project

The Emergency Department Coverage Demonstration Project (EDCDP) assists hospitals to avert closure of an emergency department due to physician unavailability. EDCDP provides urgent locum coverage as an interim measure of last resort to designated hospitals facing significant challenges covering emergency department shifts. At any given time, approximately 20 hospitals – those that have been assessed as most in need of staffing assistance – access EDCDP. Additionally, more than two-thirds of the hospitals in Ontario have received EDCDP advice regarding emergency department staffing, recruitment and retention, and sharing of best practices.

External Physician Outreach

External Physician Outreach supports qualified physicians in high-need specialties who are not practising in Ontario, but have expressed an interest in relocating to the province. Currently, External Outreach connects with physicians with specialties in: Family Medicine, emergency medicine, psychiatry, and other high-need specialties. Outreach is conducted via webinars, email campaigns, and the agency's website to generate interest from physicians best-suited to meet Ontario's needs.

Programs and Services cont'd...

General Practitioner Vacancy Locum Coverage Arrangements

The General Practitioner Vacancy Locum Coverage Arrangements (GPVLCA) provides vacancy locum coverage for high-need communities in Northern Ontario while they recruit for additional Family Medicine physicians. Thirteen communities receive varying levels of vacancy support from the GPVLCA.

Health Professionals Recruitment Tour

At the Health Professionals Recruitment Tour (HPRT), Ontario communities with vacancies meet with medical residents, medical students, and other health professionals who are beginning their careers. Hundreds of recruiters and health-care professionals attended one or more of the seven regional events. Based on consultations with the field, the agency will identify how best to assist communities with recruitment through means that effectively and efficiently meet the needs of both job seekers and the recruitment community.

HFOJobs

HFOJobs is a web-based job board connecting health-care organizations, communities and employers who have opportunities for physicians and nurses to candidates seeking employment. HFOJobs staff work with employer and community recruiters from across the province to support them on the site. HFOJobs staff also support the Nurses' Career Start Gateway for newly graduated nurses, as part of the Nursing Graduate Guarantee Initiative. In February 2014, a newly designed site was launched, providing greater user-friendliness, and efficiency in posting and searching for physician and nursing jobs across Ontario.

Internationally Educated Health Professionals Advisory Services

The Internationally Educated Health Professionals (IEHP) Advisory Services supports IEHPs living in Ontario to pursue a career in Ontario's health-care system and enables Ontario to make the best use of their skills in meeting the province's health human resources needs. The agency provides a range of information and advisory services to all of Ontario's regulated health professions; nearly 75% of all IEHP clients are physicians. Staff work with clients in group settings and on an individual basis using a case management approach to assess the client's professional background and current status, and develop an individualized action plan.

Northern Specialist Locum Programs

The Northern Specialist Locum Programs consist of two programs that support continuous patient access to specialist services in Northern Ontario. Northern Ontario communities with eligible specialist physician vacancies access the Urgent Locum Tenens Program to provide temporary specialist locum coverage while they recruit a permanent physician. For Northern Ontario communities that have a small group of specialist physicians at full complement, the Respite Locum Tenens Program provides temporary specialist locum coverage for eligible specialties/communities while local physicians are on vacation, continuing medical education or leave.

Physician Assistant Program

The Physician Assistant (PA) Program administers the PA Career Start Program that facilitates the transition of Ontario PA graduates into the health-care system to help address patient care needs. The program supports employment of graduates in priority clinical and geographic areas. In addition, the agency supports the PA Demonstration Project that introduced the PA role to the provincial health system.

Programs and Services cont'd...

Physician Recruitment Advisory Services

The Physician Recruitment Advisory Services assist practice-ready external physicians with relocation to Ontario and assist communities with external recruitment questions. Advisors provide registration, certification and immigration advice; co-ordination with key stakeholders (e.g. College of Physicians and Surgeons of Ontario, Royal College of Physicians and Surgeons of Canada); and practice information. Advisors also work with Canadians who are transitioning between medical school and residency in the US, many of whom return to Ontario to practise medicine after residency.

Practice Ontario

Practice Ontario is a service that helps Ontario post-graduate medical residents with their transition to practice across the province. Regional Advisors, in conjunction with all six medical schools, provide career counselling; assistance in identifying practice opportunities across the province; and information regarding resources, supports and incentives to Ontario post-graduate medical residents. Practice Ontario supports retention of the residents who attend medical school in Ontario.

Recruitment Essentials (formerly Recruiter U)

Recruitment Essentials is an online toolkit that includes health-care recruitment and retention tools, tips, and advice, developed by recruiters for recruiters. Topics include: Customer Relationship Management, Licensing and Supervision, Locum Guidelines and Frequently Asked Questions for Recruiters, Marketing, Physician Recruitment and Retention, Social Media, Transition Out of Practice Service (ToPs) (Succession Planning), and Working with the Media.

Regional Advisors

Regional Advisors are located across the province and have two key functions:

- To assist hospitals, employers and stakeholders with their community-based HHR initiatives. Advisors work one on one to connect health-care providers, organizations and resources, to share best practices, and assist with community and Local Health Integration Network-based health human resources planning.
- To support residents, physicians, and their partners find suitable practice opportunities in Ontario through Practice Ontario, HFOJobs, and other means.

Return of Service Programs

Through five Return of Service (ROS) programs, the Ministry of Health and Long-Term Care (MOHLTC) funds post-graduate training opportunities in exchange for a commitment to provide a period of full-time service in an eligible community in Ontario. These programs are the: International Medical Graduate Training Program; Emergency Medicine Residency Program; Repatriation Program; Re-Entry Residency Training/ Education Program; and Resident Loan Interest Relief Program. Eligible communities and length of service vary by program. The agency works closely with communities and Return of Service participants to provide program information and facilitate placements that best match their needs and interests.

Rural Family Medicine Locum Program

The Rural Family Medicine Locum Program maintains ongoing primary care in eligible communities by providing temporary short-term replacement coverage for practising rural Family Medicine physicians.

Transition into Practice Service (TiPS) (formerly Practice U)

Written in collaboration with experts across Ontario's health-care sector, this online toolkit helps physicians prepare for professional practice in Ontario. Transition into Practice Service (TiPS) modules include: The Business Side of Medicine, Compensation and Incentives, Countdown to Practice, Finding Your Ideal Practice, Physician Well-Being, and Physician Resources.

Where the Agency Provides Services

HFO MRA's Impact Across the Province

One community was chosen from each LHIN and the services provided in those sample communities are noted. While those communities include a range of rural, Northern, academic health science centres, regional referral centres, etc., this listing does not reflect all the services provided in each LHIN.

CENTRAL:
Regional Referral Centre

- Internal Success
- External Success
- Allied IEHP Success
- PA

CENTRAL EAST:
Regional Referral Centre

- Internal Success
- External Success
- Allied IEHP Success
- PA

CENTRAL WEST:
Regional Referral Centre

- Internal Success
- External Success
- Allied IEHP Success

CHAMPLAIN:
Academic Health Sciences Centre

- Internal Success
- External Success
- Allied IEHP Success
- CTP
- PA
- IMGs in Residency

ERIE ST. CLAIR:
Rural/Remote

- EDCDP
- PA

HAMILTON NIAGARA HALDIMAND BRANT:
Regional Referral Centre

- Internal Success
- External Success
- PA

MISSISSAUGA HALTON:
Regional Referral Centre

- Internal Success
- External Success
- PA

NORTH EAST:
Rural/Remote

- EDCDP
- NSLP
- RFMLP
- GPVLCA

NORTH SIMCOE MUSKOKA:
Rural/Remote

- Internal Success
- EDCDP
- PA

NORTH WEST:
Northern Urban Regional Centre

- Internal Success
- External Success
- CTP
- NSLP
- GPVLCA
- PA
- IMGs in Residency

SOUTH EAST:
Rural/Remote

- Internal Success
- EDCDP*
- RFMLP

SOUTH WEST:
Academic Health Sciences Centre

- Internal Success
- External Success
- Allied IEHP Success
- CTP
- PA
- IMGs in Residency

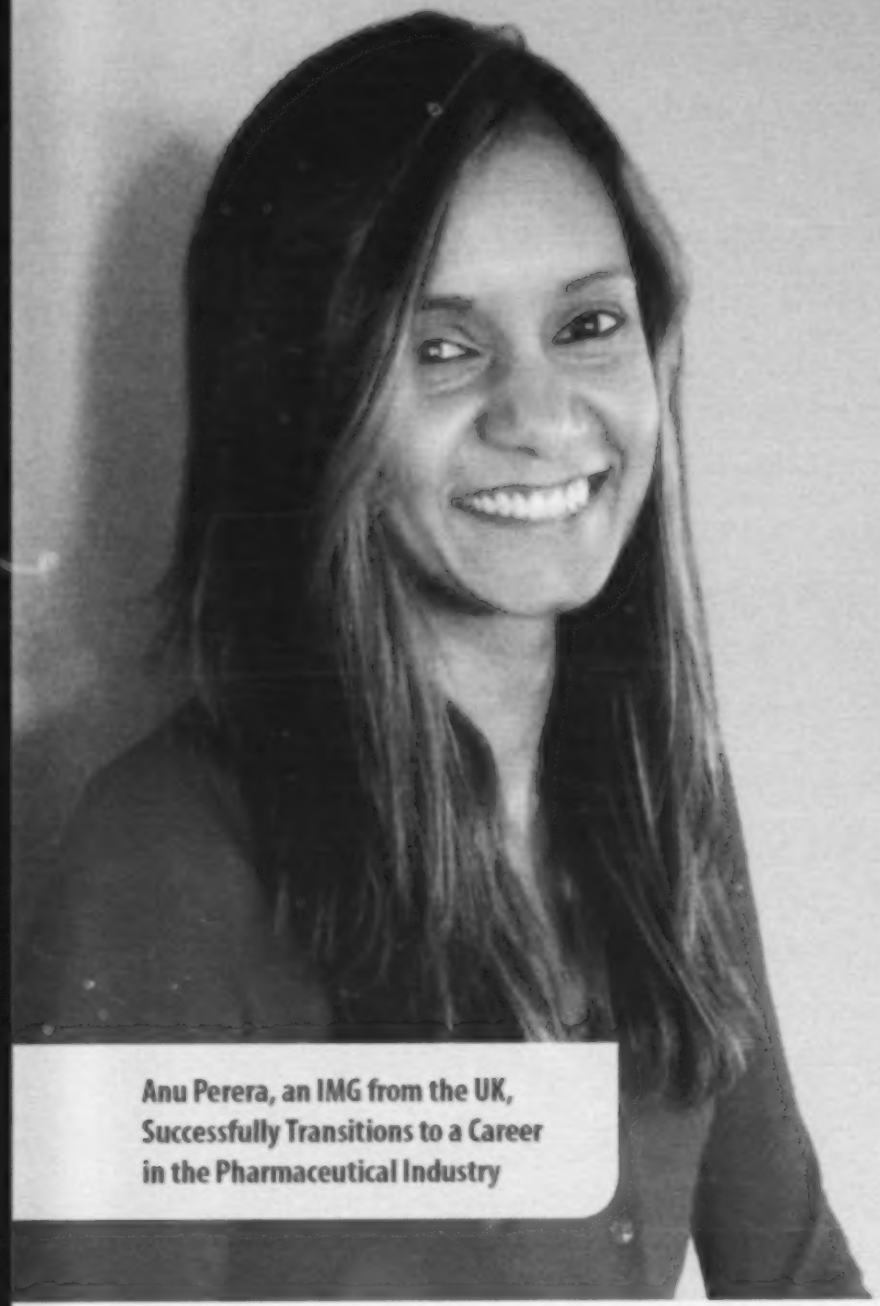
TORONTO CENTRAL:
Academic Health Sciences Centre

- Internal Success
- External Success
- Allied IEHP Success
- CTP
- PA
- IMGs in Residency

WATERLOO WELLINGTON:
Regional Referral Centre

- Internal Success
- External Success
- Allied IEHP Success
- PA

Note: All of the above communities accessed Regional Advisor and HFOJobs services.



Anu Perera, an IMG from the UK, Successfully Transitions to a Career in the Pharmaceutical Industry

Inspire

After gaining experience in the UK and US, Anu Perera, an international medical graduate from the UK, relocated to Ontario in 2009. She considered pursuing licensure but decided to explore alternatives. Ms. Perera contacted the agency in 2010, and was connected with an advisor who provided support and services to her along her career journey, including: information, resources, document review, interview preparation and follow up.

As a physician, Ms. Perera had always loved teaching and research. She initially obtained a position as a Pathophysiology Professor teaching Health Sciences students at Sheridan College. While she was able to leverage her clinical background, Ms. Perera wanted to be closer to the cutting edge of science. She began to consider a career in the pharmaceutical industry.

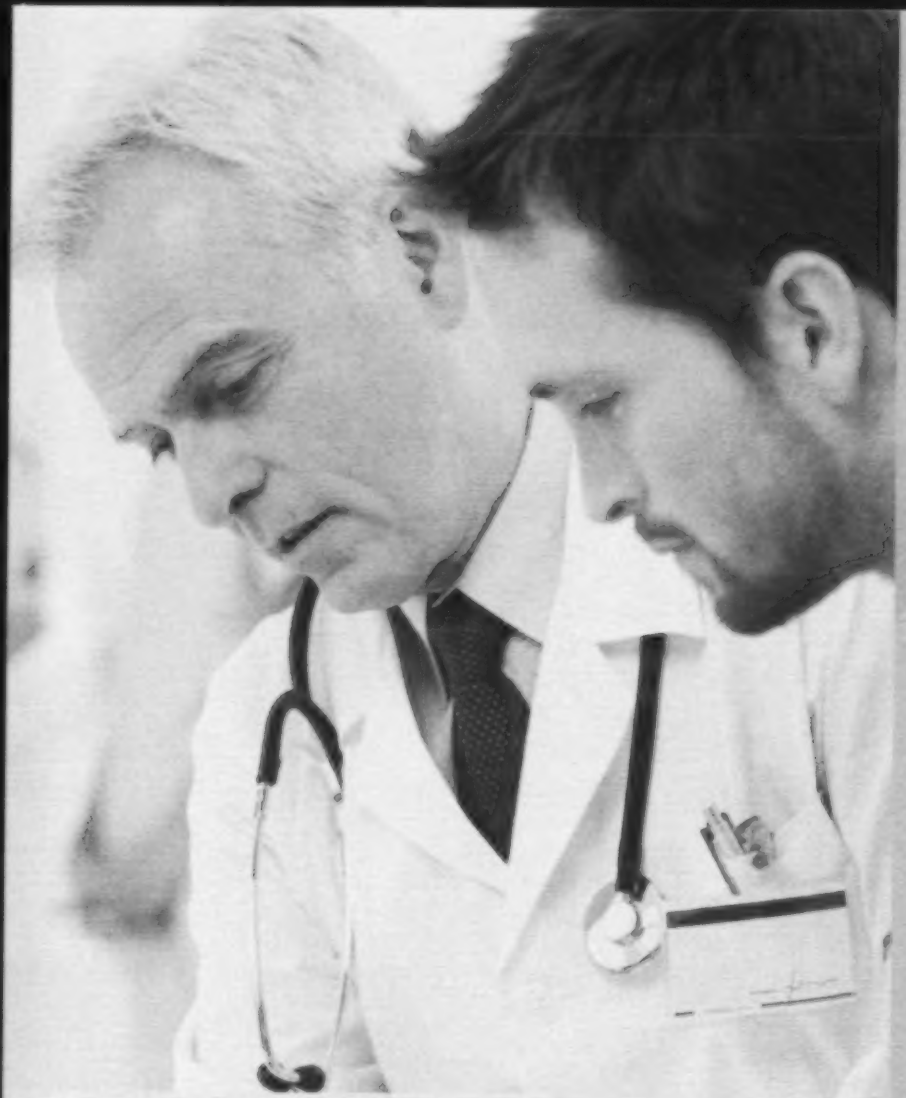
She found getting her first job in the industry challenging; she applied for jobs for more than a year without luck. Trying a different tactic, she applied to and was accepted into the Humber College Regulatory Affairs program, which included eight months of full-time school and three months of industry internship. Through the program, she gained an internship position at a large pharmaceutical company in regulatory affairs. That led to successfully obtaining a Medical Science Liaison role at the company.

As a Medical Science Liaison, Ms. Perera's key responsibilities are to establish and maintain relationships with external experts and respond to medical information requests. Her medical background has helped her to understand the data as well as its impact on patients and physicians.

The biggest challenge for Ms. Perera is viewing physicians as "customers." Occasionally she feels like she is no longer part of a club of which she was once a member. However in her company, she has met individuals with similar backgrounds to herself who have been successful in their careers. She has no regrets. She loves working in the pharmaceutical industry: the culture, the environment and the diversity. She says it is a good fit for her.

Read Anu Perera's story "in her own words" on HealthForceOntario.ca. Ms. Perera is generously planning to share her experience and inspire other IMGs considering an alternative career in an upcoming Peer-to-Peer session.

> "By offering strategies and advice, EDCDP inspires creative solutions to address unique challenges facing many of the highest-need emergency departments in the province."
>
> *- EDCDP Team*



The *2013 ED Toolkit* Facilitates ED Recruitment and Retention Conversation

Develop

Dr. William Krizmanich, ED LHIN Lead for Hamilton Niagara Haldimand Brant, was using the *2013 ED Toolkit* even before its official release. (The Emergency Department Coverage Demonstration Project (EDCDP) shared the toolkit with LHIN leads prior to release for review.) He believed the best practices captured in the toolkit would be a helpful resource for a hospital in his LHIN on the EDCDP locum program. "I needed the toolkit to create a framework for discussion with the hospital," he explains.

The ED Toolkit was developed by staff within EDCDP at HFO MRA, with input from hospital administrators, physician leaders, and ED LHIN Leads. It explains the essential components of a recruitment-and-retention-ready emergency department. The comprehensive resource also helps individuals and organizations determine ED improvement strategies.

The toolkit was shared with ED LHIN leads for distribution to ED Chiefs across the province, posted on the HealthForceOntario.ca website, and featured in the Canadian Association of Staff Physician Recruiters (CASPR) newsletter. EDCDP also continues to use the toolkit to guide communication in conversations with hospital clinical and administrative leadership.

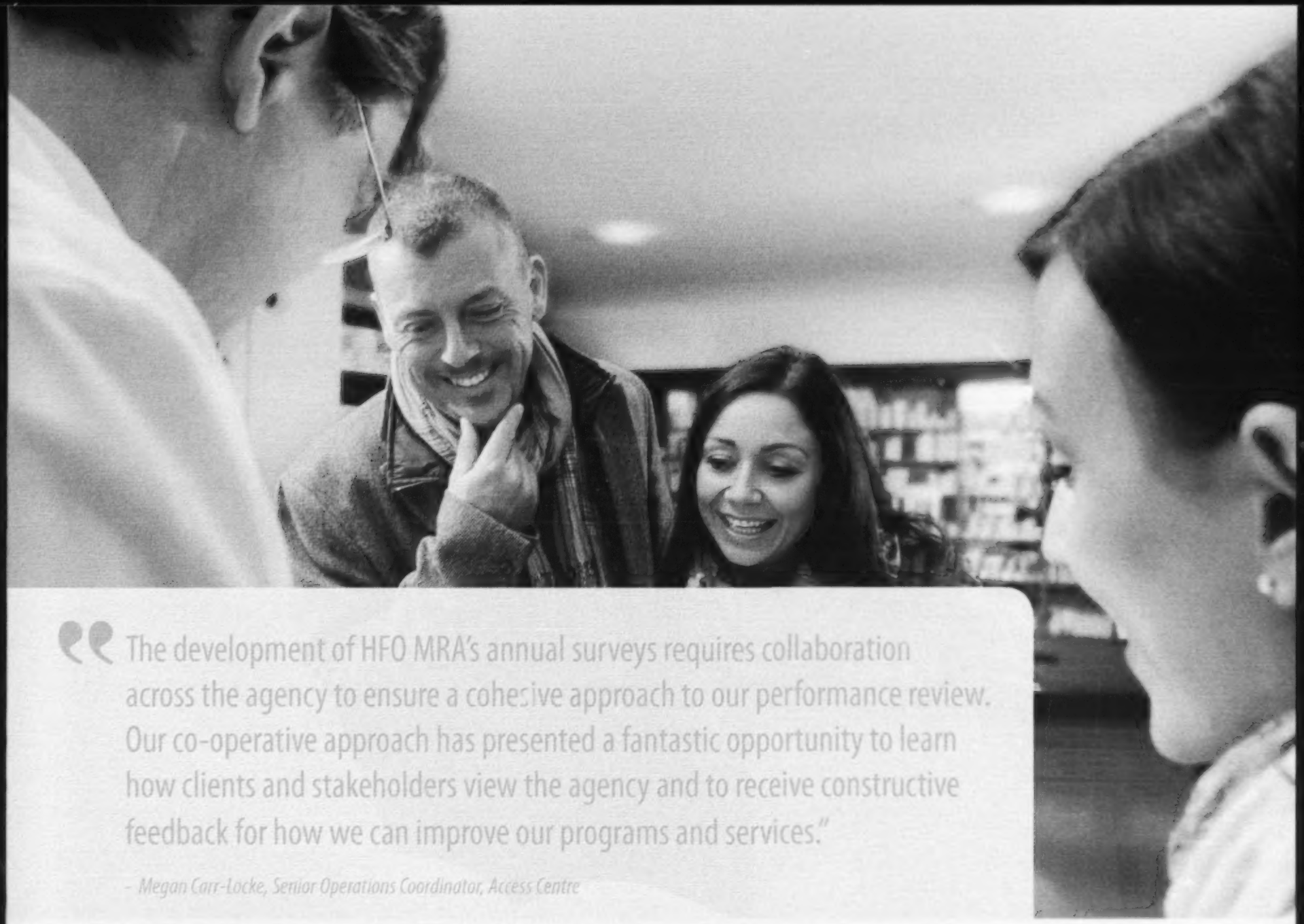
"Often it's not everything that is a problem, but a few aspects within the ED department or group that is causing difficulty with recruitment and retention," Dr. Krizmanich explains. The toolkit can help an organization "tease out" specific areas that need improvement and offer resources and best practices to address them.

Dr. Krizmanich finds value in sending the toolkit to hospital and physician leaders prior to engaging them in discussion. They can review it to determine if any points apply to them. "It provides structure to the conversation, and allows everyone to have a common language," he says.

The advice in the toolkit can be used in EDs of all sizes and types. Although it is most useful for EDs that are experiencing recruitment and retention challenges, Dr. Krizmanich notes the advice may also be helpful to well-functioning EDs that previously experienced difficulty. The leading practices may serve as a reminder to help prevent the re-emergence of old issues.

The hospital that Dr. Krizmanich engaged around the ED Toolkit has since recruited additional physicians and regained self-sufficiency in ED staffing, which has the added benefit of significant cost savings for EDCDP. Dr. Krizmanich believes the toolkit contributed to this success by facilitating discussion.

To read more stories about how HFO MRA helps clients and stakeholders, please visit HealthForceOntario.ca



"The development of HFO MRA's annual surveys requires collaboration across the agency to ensure a cohesive approach to our performance review. Our co-operative approach has presented a fantastic opportunity to learn how clients and stakeholders view the agency and to receive constructive feedback for how we can improve our programs and services."

– Megan Carr-Locke, Senior Operations Coordinator, Access Centre

HFOJobs Provides Support for Physician Recruitment and Retention

Drive

In 2013-14, Sally Hagman advertised permanent and locum physician and nurse opportunities on HFOJobs every month, posting almost 40 positions for the year. Ms. Hagman is the Recruitment Coordinator for Huron North – representing the communities of Blind River, Thessalon, Bruce Mines, and Richards Landing. "HFOJobs is a valuable part of our recruitment and retention plan," she says.

She has had particular success in finding locum physicians through HFOJobs, which she notes is important for physician retention. Ms. Hagman works with 12 physicians who are periodically on vacation and educational leave. Some physicians go on vacation for the entire summer and others take one week off a month. "If I wasn't able to get locum backup for my physicians when they want to take time off, they might not stay in rural Ontario," she explains.

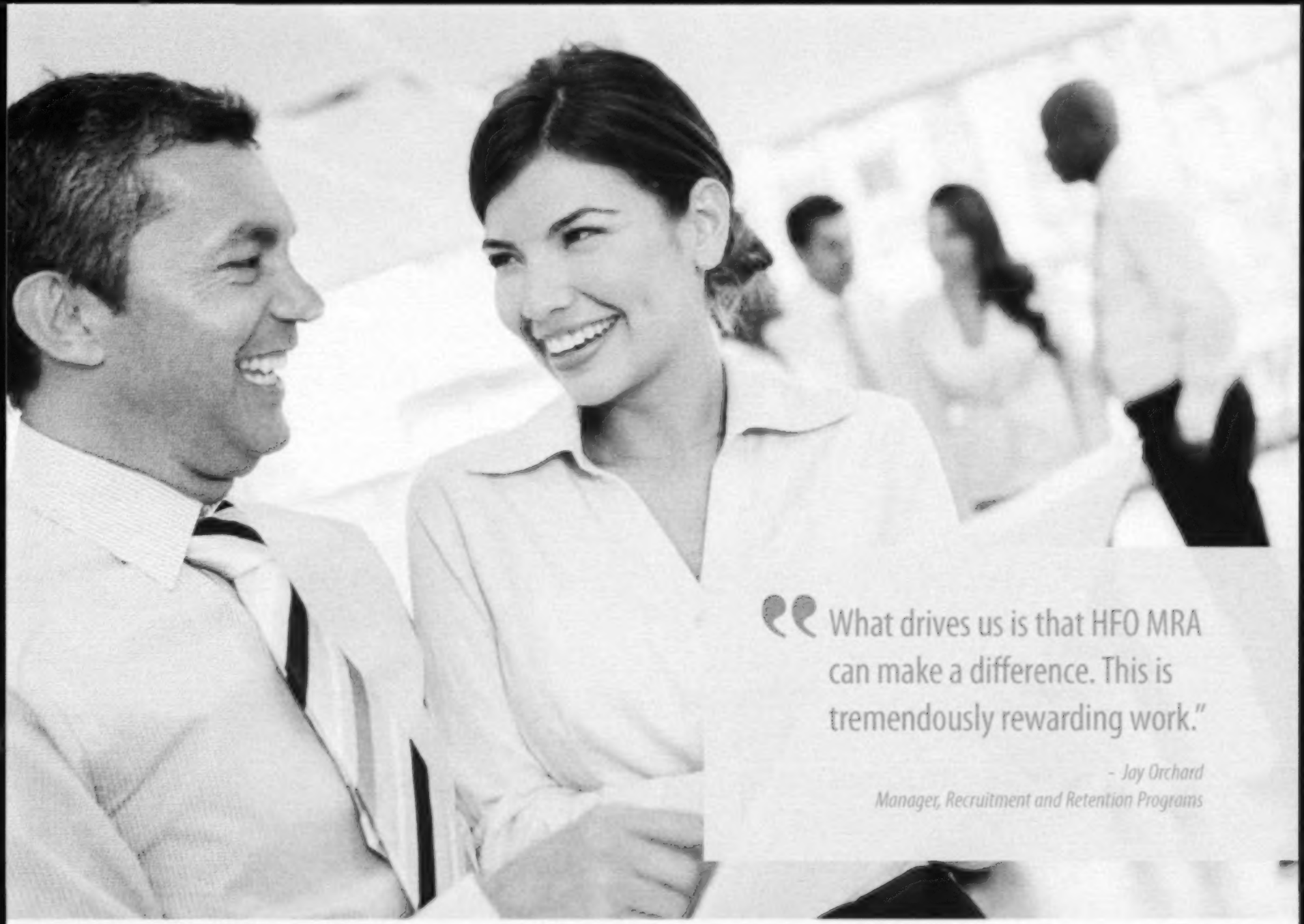
Because HFOJobs is a specialized job board dedicated to health-care providers, Ms. Hagman's postings are viewed by qualified candidates. It is free to post, which she describes as a "huge advantage." The communities' recruitment and retention budget is supported through fundraising and taxpayers' funds. Any "savings" mean these communities can spend more on other recruitment activities, such as creating a welcoming experience for physicians and nurses during site visits.

Ms. Hagman says it is easy to post positions, and finds the HFOJobs support team "extremely patient and helpful."

Ms. Hagman will continue to post opportunities on HFOJobs to drive recruitment and she recommends it to other communities. Ms. Hagman has advertised elsewhere, but she hasn't experienced the same success. As a result, she reports, "HFOJobs is the only place that we post."

HFOJobs was redesigned in 2013-14 to create a more user-friendly experience. It's faster and easier to post opportunities and manage postings.

To read more stories about how HFO MRA helps clients and stakeholders, please visit HealthForceOntario.ca



"What drives us is that HFO MRA can make a difference. This is tremendously rewarding work."

– Jay Orchard
Manager, Recruitment and Retention Programs

HFO MRA Partners

In addition to the MOHLTC, the following are partners with which the agency collaborated to drive health human resources solutions in Ontario:

- Academic Health Science Centres
- Association of Family Health Teams of Ontario
- Association of Ontario Health Centres
- Canadian Association of Staff Physician Recruiters
- Canadian Medical Association
- Canadian Resident Matching Service
- CARE Centre for Internationally Educated Nurses
- Centre for the Evaluation of Health Professionals Educated Abroad
- College of Family Physicians of Canada
- Community-based organizations
- Distributed medical education programs
- Emergency Department LHIN Leads
- Examination bodies
- Government of Ontario
- Health Canada
- Health-care bridge training organizations
- Health-service providers
- Health human resources recruiters
- Health professionals
- Hospitals
- Local Health Integration Networks
- Long-term care homes
- McMaster University Nursing Health Services Research Unit
- McMaster University Physician Assistant Program
- Medical Council of Canada
- Medical schools
- Municipal and community-based stakeholders
- Municipality associations
- Northern Ontario School of Medicine
- Ontario Hospital Association
- Ontario Medical Association
- Ontario Psychiatric Outreach Program
- Physician professional associations
- Post-graduate medical programs
- Primary-care organizations
- Professional Association of Residents of Ontario
- Regulatory colleges
- Royal College of Physicians and Surgeons of Canada
- Rural Ontario Medical Program
- Settlement agencies
- University of Toronto/Consortium Physician Assistant Program
- University of Toronto's Leslie Dan Faculty of Pharmacy
- University of Toronto's Rural Northern Initiative
- University of Toronto's Supplementary Emergency Medicine Experience Program

Corporate Governance

Board Responsibilities

The role of the HFO MRA board is to oversee the operation and management of the agency and staff, and engage in activity relating to agency policy. The board is accountable to the Minister of Health and Long-Term Care for the agency's use of public funds and results in terms of goals, objectives, performance, and strategic direction.

Board Membership and Structure

Ontario Regulation 249/07 stipulates the board shall be a maximum of nine members, one of whom is appointed Chair. For the 2013-14 year, the HFO MRA board comprised between five and seven members from across Ontario with a wealth of experience and expertise related to governance, financial management, academics, clinical practice, and other areas. This range of board diversity and experience enables the agency to be more responsive to the needs and challenges of its clients. Further, the annually updated succession plan ensures a degree of continuity on the board balanced with the injection of new perspectives. This has become increasingly important as the agency grows in scope and reach.

All HFO MRA board members are appointed by the Lieutenant Governor in Council. The board meets regularly from September through June. There is one committee of the board – Finance and Audit – that reviews financial statements and reports to the board on a regular basis.

Board Development

New board members receive an orientation by both agency and government staff. In addition, the agency provides regular updates to board members on a range of its programs, key issues, and government directions.

Conflict of Interest Policy and Codes of Ethics/Conduct

The agency has a Conflict of Interest policy and codes of ethics/conduct, which is compliant with the *Public Service of Ontario Act, 2006*.

Board Member Biographies

From left: Dr. Robert Howard, Dr. John G. Kelton, Ms. Carolyn Acker, Dr. Peter Wells, Ms. Linda Nagel, Mr. Arun K. Mathur, Mr. Arthur J.M. Lamarche

Dr. Peter Wells, Chair

Appointed: June 27, 2007 to June 27, 2012
Appointed as Vice-Chair: June 27, 2011
Reappointed: July 18, 2012
Appointed as Chair: July 18, 2012
Current Term Expires: July 17, 2015

Dr. Wells is the Founder and Executive Director of the Rural Ontario Medical Program, as well as a Collingwood-based Family Medicine physician. In 2012, the College of Family Physicians of Canada named Dr. Wells Ontario's Family Physician of the Year.

Ms. Carolyn Acker

Appointed: October 8, 2008 to October 7, 2011
Reappointed: November 16, 2011
Current Term Expires: November 15, 2014

Ms. Acker began her career as a practising Registered Nurse. She served as Executive Director of the Regent Park Community Health Centre and is Founder of Pathways to Education Canada. In 2012, Ms. Acker became a recipient of the Order of Canada.

Dr. Robert Howard

Appointed: October 22, 2008 to October 21, 2011
Reappointed: November 16, 2011
Current Term Expires: November 15, 2014

Dr. Howard is President and Chief Executive Officer of St. Michael's Hospital in Toronto. He joined the hospital as a staff Cardiologist in 1982 and has since held various leadership positions including Chief Medical Officer and Executive Vice-President, Programs and Education.

Dr. John G. Kelton

Appointed: October 22, 2008 to October 21, 2011
Reappointed: November 16, 2011
Current Term Expires: November 15, 2014

Dr. Kelton is Dean of the Faculty of Health Sciences and Vice-President of McMaster University. He has an active clinical practice and conducts research, with a particular focus on bleeding disorders of pregnant women and heparin-induced thrombocytopenia.

Mr. Arthur J.M. Lamarche

Appointed: January 29, 2014
Term Expires: January 28, 2017

Mr. Lamarche is an Executive Management/Financial Consultant and a Fellow of the Institute of Canadian Bankers. Currently retired from the federal government, he has held many executive positions in the House of Commons, Veterans Review and Appeal Board of Canada, and Member/Chair Federal Judicial Appointment Committee.

Mr. Arun K. Mathur

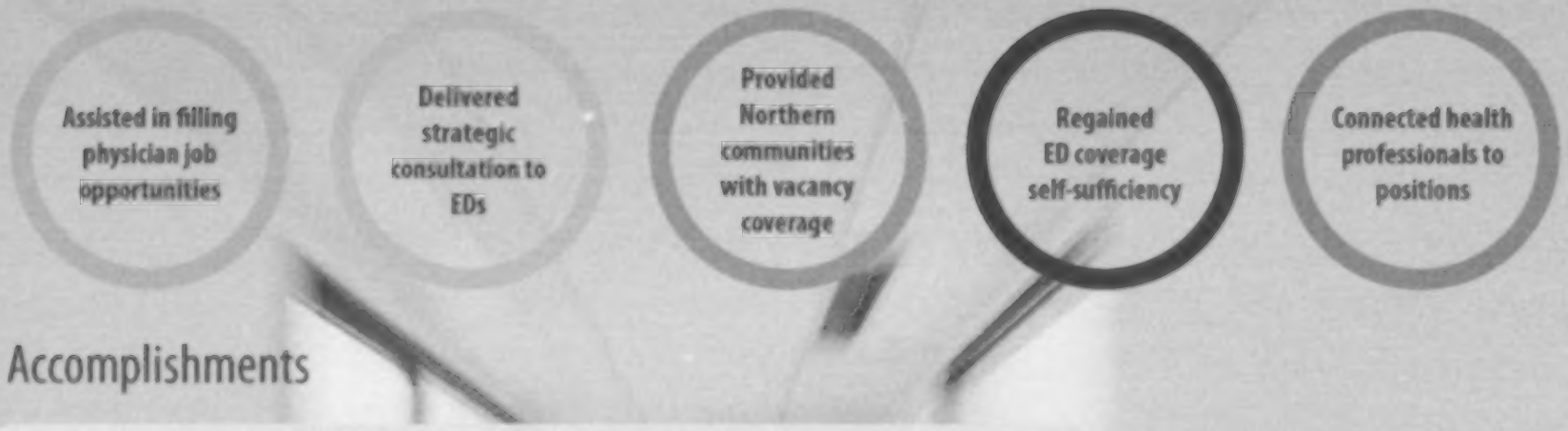
Appointed: May 17, 2011
Reappointed: May 17, 2014
Term Expires: May 16, 2017

Mr. Mathur, a Chartered Accountant, is the partner in charge of the Toronto-area office of Gerald Duthie & Co. LLP Chartered Accountants. He helps business owners facing growth and financial challenges, and advises clients on business acquisitions and complex business problems.

Ms. Linda Nagel

Appointed: January 29, 2014
Term Expires: January 28, 2017

Ms. Nagel has served as President and Chief Executive Officer of Advertising Standards Canada, Canada's national advertising self-regulatory organization, since 1994. Previously, she held senior positions in US and Canadian trade and health-care organizations.


Assisted in filling physician job opportunities
Delivered strategic consultation to EDs
Provided Northern communities with vacancy coverage
Regained ED coverage self-sufficiency
Connected health professionals to positions

Accomplishments

By inspiring, developing and driving health human resources solutions, HFO MRA accomplished the following in 2013-14:

- Regional Advisors and Physician Recruitment Advisors assisted in filling 536 physician job opportunities, 75% in high-need specialties (Family Medicine, emergency medicine, psychiatry).
- Physician Recruitment Advisors and Regional Advisors assisted 131 external physicians relocate to Ontario.
- Supported more than 301 IEHP clients who registered with their regulatory college or began an alternative career in the broader health system.
  - Of these, more than 187 IMG clients successfully entered a residency program in North America. (More than 120 IMG clients were offered a medical residency in Ontario.)
- Through the 2013 PA Career Start Grant Program, 29 PA graduates were placed in a range of health-care settings, including primary care, surgical and internal medicine.
- Of the 25 hospitals that received support from EDCDP in 2013-14, 10 recruited and regained ED coverage self-sufficiency.
- Helped to avert 36 ED closures in Ontario and provided 19,500 hours of urgent physician coverage through EDCDP.
- Delivered strategic consultation to 35 EDs through EDCDP.
- Provided 80 communities with 6,072 days of Family Medicine locum coverage through RFMLP.
- Provided 11 Northern communities with 2,581.5 days of vacancy coverage through GPVLCA.
- Provided 13 Northern communities with 7,845 days of specialist locum coverage through NSLP.
- Connected 4,133 health professionals to 3,347 physician and nurse positions posted on HFOJobs.
- Launched a newly designed HFOJobs in February 2014, with 811 physician and nurse positions posted on the site within the first two months of launch.
- Supported a client base of approximately 200 health-care organizations and more than 5,000 new nursing graduate registrants related to the Nursing Graduate Guarantee Initiative.
- Funded 435 applications from clinical clerks, who received reimbursement for select travel and accommodation expenses for a clinical rotation.
- Developed the agency's first strategic plan.
- Recruited a new Executive Director.

Performance Results

2013-14 Performance Results

Performance Measure	Target	Actual
Whether Practice Ontario sessions delivered to residents are conducted in all high-need specialties in all six Ontario medical schools.	Practice Ontario sessions delivered in all high-need specialties in all six Ontario medical schools	Practice Ontario sessions delivered in all high-need specialties in all six Ontario medical schools
The % increase of Return of Service clients as compared to the previous year.	10% increase	23% increase
The number of unplanned ED closures in Ontario due to lack of physician availability.	0	0
The % of specialist vacancies supported by NSLP that have HFOJobs postings.	100%	100%
The % of arrangements on the GPVLCA integrated into or coordinated with other RRP locum programs.	100%	100%
Client satisfaction ratings achieved on RRP locum programs	More than 75%	93.5%
The % of HPRT participants that rate the tour as satisfactory or higher.	More than 75%	89%
The number of physicians recruited to Ontario and the % of those who practise in FM, Psychiatry, EM.	100 physicians, 65% or more in FM, Psychiatry, or EM	131 physicians recruited, 79% in FM, Psychiatry, or EM
The % of clients who have relocated to Ontario that rate the agency's recruitment services as satisfactory or higher.	More than 75%	100%
The % of FM, Psychiatry, EM clients in the process of relocating to Ontario that rate the agency's recruitment services as satisfactory or higher.	More than 60%	76%
The number of IMGs matched to residency positions in North America.	225 or more	More than 187*
The % of Ontario trained PAs who are participating in the PA Career Start program placed in the province.	90%	97%

2013-14 Performance Results

Performance Measure	Target	Actual
The number of new IEHP clients.	More than 3,100	4,173**
The average number of active IEHP clients.	More than 2,000	2,900**
The % of active allied health professional clients as compared to the previous year.	10% increase	62% increase**
Client satisfaction ratings from IEHP clients who successfully enter residency, become registered to practice or enter into an alternative career.	More than 75%	99%
Client satisfaction ratings from IEHP clients who are pursuing registration or an alternative career.	More than 60%	89%**
LHIN senior management satisfaction rating of Regional Advisors	More than 75%	88.9%
The % of agency stakeholders who rate services provided by HFO MRA as satisfactory or higher.	More than 75%	97%
Quarterly financial reporting to the ministry is completed as per the MOU and TPA, and submitted within the required timeframe.	Completed	Completed
The external auditor produces an unqualified audit opinion.	Unqualified audit opinion	Unqualified audit opinion
Implement recommendations from the Management Letter where appropriate.	Implement recommendations	The external auditor did not make any recommendations for improvement

Notes:

* This is an interim number. Each year additional successes are discovered following the reporting deadline. In 2012-13, an additional 41 successes were added post-reporting.

** Targets were exceeded largely as a result of offering a one-day course to prepare internationally educated nurses (IENs) for their objective, structured clinical exam. The new course responded to the College of Nurses new requirement that IENs take the exam. High satisfaction ratings were received from the more than 1,000 IENs who participated in the course over the year.

Analysis of Operations

IT Systems

In 2013-14, HFOJobs was redesigned. The new and intuitive design results in a better experience for those seeking and posting jobs. In particular, it is now faster and easier for recruiters to post jobs and manage postings.

The IT department built a custom application that streamlines the administration of the Clerkship Travel Program (CTP). The system was designed to adhere to program parameters and includes greater audit controls.

The agency's network infrastructure underwent significant architectural changes to enhance speed, stability, security, and redundancy.

New Processes / Program Supports

The agency established a working group to develop recommendations to guide the agency's targeted use of social media and advance its strategic directions in 2014-15. Their final report is pending.

In response to changes at the College of Nurses of Ontario for internationally educated nurses (IENs) and the introduction of an Objective Structured Clinical Examination (OSCE), the agency developed an OSCE workshop and DVD. More than 700 IEN clients attended the workshop in 2013-14.

The annual client and stakeholder satisfaction survey was updated and integrated across HFO MRA so that recipients received only one survey with multiple sections. Additionally, the evaluation scale was standardized across the agency for better comparison of results.

During 2013-14, the ministry and the agency worked together to identify potential programs for migration from the ministry to the agency, starting in 2014-15. To assist with the potential transfer of up to 25 programs, and in consultation with the ministry, HFO MRA developed a *Program Transfer Guide* using the OPS Integrated Project Management Framework and Methodology, to allow for more co-ordinated program transfers going forward.

Human Resources

To support the implementation of HFO MRA's new strategy and ensure the agency is achieving its outcomes and managing risks across the organization, a new organizational design is being introduced.

The organizational structure increases accountability; leverages the agency's strengths; better accommodates the grouping of like functions; and specifically assigns corporate responsibilities, such as knowledge management, process improvement, and strategic partnerships.

Government Directives

As per the Memorandum of Understanding, the agency complies with directives, policies, and guidelines issued by the government and other government authoritative bodies. To maintain compliance, the ministry communicates to the agency any new directives or changes to existing directives.

Analysis of Financial Position and Financial Statements

Analysis of Financial Position 2013-2014

- The audited financial statements, included in this Annual Report, confirm all expenditures were within budget.
- The external auditors, KPMG, issued an unqualified opinion stating the financial statements present fairly, in all material respects, the financial position of HFO MRA as at March 31, 2014, and its results of operations and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.
- The 2013-2014 fiscal year is the second year in which HFO MRA was able to present a full set of financial statements including the Statement of Financial Position, Statement of Operations and Repatriation of Contributions, Statement of Changes in Net Assets, and Statement of Cash Flows. Resulting from this full set of financial statements, all unspent funds are presented on the Statement of Operations and Repatriation of Contributions as an expense item, as required by Generally Accepted Accounting Principles. Unspent funds are calculated by reconciliation between the ministry and the agency. On a regular basis, the agency remits to the ministry the unspent funds to ensure they are returned in an appropriate timeframe. Further information is provided in the Notes to the Financial Statements (Note 4).
- Ontario Physician Locum Program physician payments continue to be paid directly to the recipient physicians by the ministry. The physician payments made by the ministry are recorded in the Notes to the Financial Statements (Note 3).
- The agency continued to provide facility and information technology support to Transitional Councils for four health regulatory colleges on a no-cost basis. Actual costs are reflected in the agency's Statement of Operations and Repatriations of Contributions.
- As required by the ministry, the agency achieved annualized administrative efficiencies of 2.5% on base funds. This reduction of expenditures was accomplished through the reallocation of priorities while maintaining service levels.

Financial Statements of

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Years ended March 31, 2014 and 2013

KPMG LLP
Yonge Corporate Centre
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Toronto ON M2P 2H3
Canada

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Fax (416) 228-7123
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INDEPENDENT AUDITORS' REPORT

To the Board of Directors of HealthForceOntario Marketing and Recruitment Agency

We have audited the accompanying financial statements of HealthForceOntario Marketing and Recruitment Agency, which comprise the statement of financial position as at March 31, 2014, the statements of operations and repatriation of contributions, changes in net assets and cash flows for the year then ended, and notes, comprising a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of HealthForceOntario Marketing and Recruitment Agency as at March 31, 2014, and its results of operations and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

KPMG LLP

Chartered Professional Accountants, Licensed Public Accountants

June 24, 2014
Toronto, Canada

KPMG LLP is a Canadian limited liability partnership and a member firm of the KPMG network of independent member firms affiliated with KPMG International Cooperative ("KPMG International"), a Swiss entity. KPMG Canada provides services to KPMG LLP.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statement of Financial Position

March 31, 2014, with comparative information for 2013

	2014	2013
Assets		
Current assets:		
Cash	$ 3,373,186	$ 2,522,898
Prepaid expenses	152,732	217,747
	3,525,918	2,740,645
Capital assets (note 2)	132,919	138,516
	$ 3,658,837	$ 2,879,161
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities (note 4)	$ 3,859,955	$ 1,099,675
Net assets:		
Unrestricted (deficiency)	(334,037)	1,640,970
Invested in capital assets	132,919	138,516
	(201,118)	1,779,486
Commitments and contingencies (note 6)		
Economic dependence (note 7)		
	$ 3,658,837	$ 2,879,161

See accompanying notes to financial statements.

On behalf of the Board:

Director

Director

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statement of Operations and Repatriation of Contributions

Year ended March 31, 2014, with comparative information for 2013

	2014	2013
Revenue:		
Ministry of Health and Long-Term Care - Component	$ 10,784,048	$ 10,962,800
Clerkship Travel Program One-time	400,000	–
Ministry of Health and Long-Term Care		
Physician Assistant Grant Program	6,831,400	4,321,672
Health Integration Resources and Education	–	215,826
	18,015,448	15,500,298
Expenses:		
Salaries and benefits	7,938,708	7,478,737
Base:		
Corporate Affairs	1,665,016	1,415,578
Clerkship Travel Program	301,092	185,388
Community Partnership Program	163,620	138,480
Access Centre	104,737	167,536
Amortization	80,746	180,689
Ontario Physician Locum Programs ("OPLP") (note 3)	70,668	44,550
Board of Directors	62,230	5,295
Recruitment and Retention Outreach	46,415	29,127
Website	4,712	26,675
HFOJobs	6,677	7,073
One-time:		
Physician Assistant Grant Program	6,119,779	3,643,791
Health Professionals Recruitment Tour	120,226	130,119
Nursing Graduate Guarantee	74,162	80,435
Clerkship Travel Program	70,804	–
Other	69	110,972
Health Integration Resources and Education	–	83
Total expenses	16,829,660	13,644,528
Excess of revenue over expenses before repatriation of contributions	1,185,788	1,855,770
Ministry of Health and Long-Term Care repatriation of contributions (note 4)	(3,166,392)	–
Excess (deficiency) of revenue over expenses after repatriation of contributions	$ (1,980,604)	$ 1,855,770

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statement of Changes in Net Assets

Year ended March 31, 2014, with comparative information for 2013

	Invested in capital assets	Unrestricted	2014 Total	2013 Total
Balance, beginning of year	$ 138,516	$ 1,640,970	$ 1,779,486	$ (76,284)
Excess (deficiency) of revenue over expenses before repatriation of contributions	(80,745)	1,266,533	1,185,788	1,855,770
Ministry of Health and Long-Term Care repatriation of contributions (note 4)	–	(3,166,392)	(3,166,392)	–
Net change in investment in capital assets	75,148	(75,148)	–	–
Balance, end of year	$ 132,919	$ (334,037)	$ (201,118)	$ 1,779,486

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Statement of Cash Flows

Year ended March 31, 2014, with comparative information for 2013

	2014	2013
Cash provided by (used in):		
Operating activities:		
Excess (deficiency) of revenue over expenses after repatriation of contributions	$ (1,980,604)	$ 1,855,770
Amortization of capital assets which does not involve cash	80,745	180,689
Change in non-cash operating working capital:		
Prepaid expenses	65,015	(40,598)
Accounts payable and accrued liabilities	2,760,280	(1,505,196)
Deferred contribution	–	(221,672)
	925,436	268,993
Investing activities:		
Net purchase of capital assets	(75,148)	(191,794)
Net increase in cash	850,288	77,199
Cash, beginning of year	2,522,898	2,445,699
Cash, end of year	$ 3,373,186	$ 2,522,898

See accompanying notes to financial statements.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements

Year ended March 31, 2014

HealthForceOntario Marketing and Recruitment Agency (the "Agency") is an operational service agency of the Ministry of Health and Long-Term Care (the "Ministry"). The Agency was incorporated without share capital under the Development Corporations Act, Regulation 249/07, as of June 6, 2007. As part of the Regulation, the Agency is only allowed to receive money or assets from The Crown in Right of Ontario.

The creation of the Agency arose out of the government's health human resource strategy. The Agency is dedicated to making Ontario the "employer of choice" in health care, and to ensure Ontarians have access to the right number and mix of qualified health care providers, when and where they are needed, now and in the future. The Agency's programs and services can be grouped in two categories:

1. Retention and distribution of Ontario's health professionals;
2. Recruitment of and outreach to:
   (a) Internationally educated health professionals living in Ontario;
   (b) Ontario's recruitment community;
   (c) Practice-ready physicians in high-need specialties outside of Ontario.

Consistent with the 2012/2013 Transfer Payment Agreement ("TPA"), Schedule A, the Memorandum of Understanding, and the Development Corporations Act, the Agency executes programs and services as follows:

- Outreach to physicians from outside Ontario;
- Internationally Educated Health Professionals ("IEHP") Advisory Services;
- IEHP workplace Health Integration Resources and Education - ("HIRE") IEHP;
- Ontario physician retention/Practice Ontario/Return of Service;
- HealthForceOntario.ca and HFOJobs.ca;

- Regional Advisors;
- Emergency Department Coverage Demonstration Project;
- Rural Family Medicine Locum Program;
- Northern Specialist Locum Programs;
- General Practitioner Vacancy Locum Coverage Arrangements;
- Corporate Affairs;
- Physician Assistant Grants;
- Clerkship Travel Program;
- Health Professionals Recruitment Tour;
- Facilities Services to a maximum of five Transitional Councils for regulatory health professional colleges; and
- Client support for the Nursing Graduate Guarantee Initiative.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Year ended March 31, 2014

1. **Significant accounting policies:**

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards, including the 4200 standards for government not-for-profit organizations.

(a) Revenue recognition:

The Agency is funded through three TPAs with the Ministry. The principal TPA provides funding for the majority of the Agency's expenses, including salaries and benefits, base and one-time funding. A secondary TPA provides funding for the Physician Assistant Grant Program (note 4) which the Agency administers on behalf of the Ministry.

The last TPA provides funding for the Clerkship Travel Program which the Agency administers on behalf of the Ministry.

The Agency follows the deferral method of accounting for contributions which include government grants.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

The Agency does not receive externally restricted contributions as all funding must be received from the Ministry.

(b) Expenses:

The Agency divides its expenditures into two categories: Base and One-time. Base expenses include funds expended by the Agency to provide ongoing programs and services to clients and stakeholders, and corporate services to the Agency. One-time expenses relate to programs and services to clients and stakeholders which may be limited to the current fiscal year.

1. **Significant accounting policies (continued):**

(c) Allocation of expenses:

The Agency records a number of its expenses by program. The cost of each program includes the personnel, premises and other expenses that are directly related to providing the program.

Administration and corporate governance are not allocated.

(d) Capital assets:

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution. Assets acquired under capital leases are amortized over the estimated lives of the assets or over the lease term, as appropriate. Repairs and maintenance costs are charged to expense. Betterments which extend the estimated life of an asset are capitalized. When a capital asset no longer contributes to the Agency's ability to provide services, its carrying amount is written down to its residual value.

Works of art, historical treasures and intangible assets are not recognized in these financial statements.

Capital assets are amortized on a straight-line basis using the following annual rates:

Furniture and fixtures	20%
Computer hardware	33%
Computer software	33% - 100%
Leasehold improvements	Lease term

(e) Employee future benefits:

The costs of multi-employer defined contribution pension plan benefits, such as the Public Service Pension Plan ("PSPP"), are the employer's contributions due to the plan in the period.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Year ended March 31, 2014

1. **Significant accounting policies (continued):**

(f) Use of estimates:

The preparation of the financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the year. Significant items subject to such estimates and assumptions include the carrying amount of capital assets and obligations related to employee future benefits. Actual results could differ from those estimates.

2. **Capital assets:**

	Cost	Accumulated amortization	2014 Net book value	2013 Net book value
Furniture and fixtures	$ 191,642	$ 157,166	$ 34,476	$ 33,014
Computer hardware	353,501	290,767	62,734	52,736
Computer software	222,226	222,226	–	8,129
Leasehold improvements	261,675	225,966	35,709	44,637
	$ 1,029,044	$ 896,125	$ 132,919	$ 138,516

The Agency has full use and enjoyment of assets paid for by the Government of Ontario; as such, the historical cost of these assets is not recorded in the Agency's books. Assets paid for by the Government of Ontario include leasehold improvements, computer hardware and furniture and fixtures.

3. Ontario Physician Locum Programs ("OPLP"):

The OPLP provides centralized and coordinated locum physician assistance for hospitals, communities and physicians across the Province of Ontario. The Ministry makes the payments directly to the physicians for the locum services provided. The Agency administers the programs and records as expenses the general operating costs and salaries and benefits.

During the year, OPLP physician payments made by the Ministry were $22,023,453 (2013 - $23,450,759). The OPLP physician payments issued by the Ministry directly to physicians are not presented on the statement of operations. Funds flowing through the Agency are for the purpose of OPLP administration only. No funds flow to the Agency for physician payments.

4. Ministry of Health and Long-Term Care repatriation of contributions:

Fiscal year	Type	Amount	Status at March 31, 2014
2011 - 2012	Final	$ 352,015	Paid
2012 - 2013	Estimated	1,622,993	Accrued
2013 - 2014	Estimated	1,191,384	Accrued
		$ 3,166,392	

The Agency returns to the Ministry surplus amounts based on a reconciliation process with the Ministry. The amounts noted above as estimated are management's best estimates; actual results could differ from those estimates. The Agency has remitted $1,622,993 to the Ministry for fiscal year 2012-2013 subsequent to year end.

5. Employee future benefits:

The Agency makes contributions to the PSPP, which is a multi-employer plan, on behalf of certain members of its staff. The plan is a defined benefit plan which specifies the amount of the retirement benefit to be received by the employees based on the length of service and rates of pay.

HEALTHFORCEONTARIO MARKETING AND RECRUITMENT AGENCY

Notes to Financial Statements (continued)

Year ended March 31, 2014

5. Employee future benefits (continued):

Contributions for employees with a normal retirement age of 65 were being made at a rate of 6.4% for earnings up to the yearly maximum pensionable earnings of $52,500 and at a rate of 9.5% for earnings greater than the yearly maximum pensionable earnings. The amount contributed to PSPP for 2014 was $476,341 (2013 - $453,299) for current service and is included as an expense on the statement of operations. Employees' contribution via payroll deductions to PSPP in 2014 was $468,282 (2013 - $457,435).

6. Commitments and contingencies:

(a) The Agency has entered into an operating lease for the premise which expires in 2018. Approximate future minimum lease payments are as follows:

2015	$ 483,800
2016	483,800
2017	483,800
2018	161,300
	$ 1,612,700

(b) Indemnity insurance has been provided to all directors and officers of the Agency for various items including, but not limited to, all costs to settle suits or actions due to association with the Agency, subject to certain restrictions. The Agency has purchased directors' and officers' liability insurance to mitigate the cost of any potential future suits or actions. The term of indemnification is not explicitly defined, but is limited to the period over which the indemnified party served as a director or officer of the Agency. The maximum amount of any potential future payment cannot be reasonably estimated.

The nature of these indemnification agreements prevents the Agency from making a reasonable estimate of the maximum exposure due to the difficulties in assessing the amount of liability which stems from the unpredictability of future events and the unlimited coverage offered to counterparties.

7. Economic dependence:

The Agency is economically dependent upon the continued financial support of the Ministry.

8. HealthForceOntario Marketing and Recruitment Agency:

	Salaries and benefits	General operations	Actual	Budget
Revenues:				
Component			$ 19,784,049	$ 13,592,800
CTP One Time Funding			400,000	400,000
PA Funding			6,831,400	6,831,400
Total			$ 59,015,449	$ 20,824,200
Expenses:				
Base components:				
Board of Directors:				
Salaries and benefits	12,571	–	$ 12,571	$ 18,390
General operating	–	62,230	62,230	75,680
Total			74,801	94,070
Corporate Affairs:				
Salaries and benefits	2,060,651	–	2,060,651	2,223,434
General operating	–	1,745,761	1,745,761	1,880,016
Total			3,806,412	4,103,450
Clerkship Travel Program:				
General operating	–	301,092	301,092	2,630,200
Total			301,092	2,630,200
Access Centre:				
Salaries and benefits	1,940,041	–	1,945,041	2,062,780
General operating	–	104,737	104,737	115,100
Total			2,049,778	2,177,880
Website:				
General operating	–	4,712	4,712	10,032
Total			4,712	10,032
HF Guide:				
Salaries and benefits	118,384	–	118,384	120,893
General and operating	–	6,677	6,677	28,520
Total			125,061	149,413
Outreach:				
Salaries and benefits	166,166	–	168,166	203,955
General operating	–	46,415	46,415	44,300
Total			214,581	248,255
IBP - Community Partnership:				
Salaries and benefits	1,270,453	–	1,270,453	1,355,053
General operating	–	163,600	163,600	117,500
Total			1,434,053	1,473,453
OPLP:				
Salaries and benefits	1,578,866	–	1,578,866	1,691,522
General operating	–	70,668	70,668	29,750
Total			1,649,534	1,691,272
Base component total			$ 9,660,054	$ 12,577,800

8. HealthForceOntario Marketing and Recruitment Agency (continued):

	Salaries and benefits	General operations	Actual	Budget
One-time components:				
CTP:				
General operating	–	70,804	$ 70,804	$ 400,000
Total			70,804	400,000
NGO:				
Salaries and Benefits	183,916	–	183,916	199,670
General operating	–	74,162	74,162	80,330
Total			258,078	280,000
HPRT:				
Salaries and Benefits	42,681	–	42,681	52,579
General operating	–	120,226	120,226	182,427
Total			162,907	235,006
Other:				
Salaries and Benefits	433,446	–	433,446	482,542
General operating	–	69	69	17,458
Total			433,515	500,000
Physician Assistant:				
Salaries and Benefits	124,523	–	124,523	210,000
General operating	–	8,119,779	8,119,779	6,621,400
Total			8,244,302	6,831,400
One-time component total			$ 7,169,606	$ 8,246,406
Total expenses			**$ 16,829,960**	**$ 20,824,200**
Surplus/(shortage)			**$ 1,185,760**	

Find out more about HealthForceOntario Marketing and Recruitment Agency:

www.HealthForceOntario.ca
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Available in accessible format upon request:
www.HealthForceOntario.ca/acs

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